

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

| | | | |
|---|--|---|--|
| NAME OF COMMITTEE (In Full) STRONG LEADERSHIP FOR AMERICA | | FEC IDENTIFICATION NUMBER ▼ C C00615948 | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Payee PEAK STRATEGIC SOLUTIONS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 13 / 2016 | | |
| Mailing Address 3220 N STREET, NW #146 | | | Amount 4500.00 | | |
| City WASHINGTON | State DC | Zip Code 20007 | Transaction ID : SE.4181 | | |
| Purpose of Expenditure PRINTING | | Category/Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 14 / 2016 | | |
| Name of Federal Candidate ROGER W MARSHALL | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS | | |
| Calendar Year-To-Date Per Election for Office Sought 119063.97 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | |

| | | | | | |
|--|-------|---|--|--|--|
| Full Name of Payee | | | Date of Public Distribution/Dissemination MM / DD / YYYY | | |
| Mailing Address | | | Amount | | |
| City | State | Zip Code | Date of Disbursement or Obligation MM / DD / YYYY | | |
| Purpose of Expenditure | | Category/Type | MM / DD / YYYY | | |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | | |
| Calendar Year-To-Date Per Election for Office Sought | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | |

| | |
|--|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 4500.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 4500.00 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

THOMAS DATWYLER

[Electronically Filed]

Date

 MM / DD / YYYY
 07 / 14 / 2016

Signature